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CONFIRMATION NO. 1809

<b>SERIAL NUMBER</b> 10/750,495	<b>FILING OR 371(c) DATE</b> 12/31/2003 <b>RULE</b>	<b>CLASS</b> 714	<b>GROUP ART UNIT</b> 2114	<b>ATTORNEY DOCKET NO.</b> 200313714-1
<b>APPLICANTS</b> David W. Hartwell, Bolton, MA; Maurice B. Steinman, Marlborough, MA;				
<b>** CONTINUING DATA *****</b>				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 05/01/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Allowance</i> Acknowledged <u>                    </u> Examiner's Signature <u>                    </u> Initials		<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 29
			<b>INDEPENDENT CLAIMS</b> 4	
<b>ADDRESS</b> 22879				
<b>TITLE</b> Restoring access to a failed data storage device in a redundant memory system				
<b>FILING FEE RECEIVED</b> 1148	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	